



# BLUE COAT CHURCH OF ENGLAND ACADEMY

## SUPPLEMENTARY INFORMATION FORM

### APPLICATION FOR A PLACE ON FAITH GROUNDS

This form should only be completed for pupils whose families have been faithful and regular worshippers for at least twice a month for two years prior to application in a Church of England Parish Church or other Anglican place of worship, or in another Christian Church affiliated to Churches Together in Britain and Ireland (CTBI) and/or the Evangelical Alliance

#### 1. Full Name of Child

#### Date of Birth (ddmmyy)

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#### 2. Address and Postcode

Email Address:	Contact No.

#### 3. Name and Address of Church/Place of Worship attended

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#### 4. Denomination (please tick)

Church of England	<input type="checkbox"/>	Roman Catholic	<input type="checkbox"/>
Baptist	<input type="checkbox"/>	Society of Friends (Quaker)	<input type="checkbox"/>
Methodist	<input type="checkbox"/>	Salvation Army	<input type="checkbox"/>
Orthodox	<input type="checkbox"/>	United Reformed Church	<input type="checkbox"/>
Elim	<input type="checkbox"/>	Other Christian	<input type="checkbox"/>

If you have ticked "Other Christian" above, please specify

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#### 5. How long have you/the child worshipped here?

Parent(s) / Guardian(s):

Child:

Years &

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Months

Years

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& Months

#### 6. How many times per month (including weekday services) do you/the child worship

Parent(s)/Guardian(s):

Child:

x per month

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x

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per month

**7. If you have moved within the last two years, please give details of your previous place of worship and length/frequency of attendance**

**8. Does your child currently attend a designated “Feeder” Primary School (see Appendix A of the Academy Admissions Policy)?**

Yes  
No

☐  
☐

If Yes, please state name of the Primary School Attended:-

**9. Name of Minister/Faith Leader of your current place of worship & Contact details**

**10. Declaration by Parent/Carer**

I certify that these details are, to the best of my knowledge, correct

Signed:

(Parent/Guardian)

Date:

Name of person signing (Please print in BLOCK CAPITALS)

**11. Declaration by Faith Leader (Your faith application will only be accepted if the details below are provided and it is signed and stamped by your Faith Leader)**

I certify that the information in Sections 3-6 is, to the best of my knowledge, correct

Signed:

Official Stamp:

Name:

Email Address:

Contact Number:

(Minister/Faith Leader)

Date:

**THIS FORM MUST BE COMPLETED IN FULL, SIGNED AND STAMPED BY YOUR FAITH LEADER AND RETURNED DIRECTLY TO THE ACADEMY AT THE ADDRESS SHOWN BELOW BY 31<sup>ST</sup> OCTOBER 2025 AT THE LATEST**

**PLEASE RETURN TO:**

**Admissions Officer  
Blue Coat CE Academy  
Birmingham Street  
Walsall  
WS1 2ND**

**Tel: 01922 720558  
Email: [st-karra-k@bluecoatacademy.org](mailto:st-karra-k@bluecoatacademy.org)**